



The impact of COVID-19 on children and young people

Introduction

The coronavirus pandemic has disrupted the life of every child in the country. It is not only an unprecedented public health emergency, but also a challenge our society and our economy have not seen in peacetime.

The Children's Society welcome the coming together of politicians, professionals and communities to do everything it takes to respond to this crisis. The measures announced by the Treasury last week, to protect jobs and those facing financial insecurity through the course of the pandemic, are also a major step in the right direction. However, we know that there is much more to be done in coming weeks and months to:

- **Protect children and families facing financial insecurity as a result of the crisis** and to prevent child poverty reaching a record high – especially through ensuring that social security payments increase if earnings fall, that there is emergency financial support available for those who need and to guarantee that no child is left without a safety net.
- **Respond to every child** – including those excluded from mainstream systems of support on account of their immigration status.
- **Keep children and young people safe**, whether they are continuing to attend school or staying at home particularly for those at risk of abuse or neglect and those with special educational needs
- **Support the mental health and wellbeing of all children through the crisis** – particularly in the context of school closures and pressure on health services.

There is no denying that the Government – and other decision makers at every level - face a colossal challenge. We recognise the efforts that have been made in some of the areas identified above, and in its huge public health mobilisation.

This briefing outlines our key concerns and recommendations around the impact of COVID-19 on children in poverty, refugee and migrant children, young people at risk, and around children's mental health and wellbeing. We hope it can make a small contribution to decisions which will need to be made in the near future, to help ensure the impact of this pandemic on children- and particularly those in the most vulnerable situations- is minimised.

The Children's Society is a leading national charity committed to improving the lives of thousands of children and young people every year. We work across the country with some of the most disadvantaged children and young people through our specialist services. We place their voices at the centre of the work that we do.

We continue to do all we can to support the collective effort to face the COVID-19 crisis, and to ensure the social and economic effects of the coronavirus are not felt in the lives of our children in the years ahead.

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1. Children in poverty

Whilst impacting on every child in the country, COVID-19 is likely to have a particularly pernicious impact on the estimated four million children and young people already living in poverty in the UK. Furthermore, we estimate that 1.7 million children aged 10-17 are living in a household with problem debt and an estimated 2.1 million children of the same age are living in a household where there has been difficulty paying the bills.¹

Financial instability will rise during the COVID-19 crisis and low-income families already unable to budget for unexpected expenses will be hit the hardest. This short briefing focuses on the likely impact of COVID-19 on young people facing poverty or destitution.

The UK government has implemented measures to tackle this serious public health crisis, including closing schools (except for children of key workers and the most vulnerable children who have social workers) and enforcing social distancing, including working from home where possible. These measures are understandable and necessary in the given context. However, it is important to recognise the impact they are likely to have on children and young people, particularly those in low-income families or living in poverty.

School closures, while an important way to stave the spread of COVID-19, could result in increased social isolation for young people. Although many schools are providing online learning, children whose families cannot afford access to laptops, phones or adequate internet or phone connections are likely to miss out on vital learning. For children who cannot access any such e-learning that schools are providing, there is also an added risk of stigma or shame.

Costs of living will increase for families as more children are at home, while earnings for parents are likely to decrease, meaning families will struggle with the cost of food and other essentials. Increased childcare responsibilities for parents while children are not in school, and without the possibility of help from family networks (such as grandparents), are also likely to put additional financial strain on families.

The outbreak of COVID-19 will continue to impact family finances, both in reducing income for many (such as parents on zero-hours contracts, with little job security or who work in particularly affected industries such as hospitality) and increased costs (of additional childcare, higher food and utility bills caused by family being at home more). To minimise the impact of COVID-19 on these children and young people, we recommend government undertakes changes to the following areas:

School closures and Free School Meals

School closures mean that children can no longer receive Free School Meals, which are worth around £400 per year per child.² Although the Government's proposed roll-out of a national voucher scheme for those who rely on free school meals is welcome, it will be crucial for Government in the coming days to clarify the mechanism through which this will be implemented. **The Government should ensure Free School Meal vouchers are easily attainable, without a significant time lag, and valid for exchange in a range of accessible shops or food outlets. These should be available to all school children, regardless of their family's immigration status.**

¹ The Children's Society, 2017, *Good Childhood Report*, https://www.childrenssociety.org.uk/sites/default/files/the-good-childhood-report-2017_full-report_0.pdf p 47

² <https://www.childrenssociety.org.uk/sites/default/files/free-school-meals-universal-credit-briefing-15-jan-2018-final.pdf>

Families with children not receiving Free School Meals are also likely to struggle with the cost of food, especially given predicted losses of income during the COVID-19 outbreak and overall increase in cost of living as children are at home. This is likely to lead to an increase in families using foodbanks, similar to rises in the school holidays. However, supermarket shortages and panic buying during the COVID-19 outbreak have put additional pressures on foodbanks. Precautions around social distancing will also mean reduced staffing and access to foodbanks. As such, many families will desperately need alternative means to make ends meet. **A temporary uplift in Child Benefit Payments for all parents of £10 per child per week would help these families during this period of financial uncertainty.**

Universal Credit

The £1000 uplift in the Universal Credit standard allowance announced on 20 March is very welcome and will provide around £20 per week extra support for working and non-working families alike. However, issues remain around lag-times in transitioning onto the system and receiving initial payment.

Universal Credit should support families instead of pushing them towards a financial crisis, especially during the COVID-19 pandemic when families may be losing income from employment. The five-week wait for an initial Universal Credit payment can leave families without enough money to pay bills or to provide food for their children, pushing them into financial difficulty.

Removing or at least temporarily suspending the five-week wait for the initial payment during the COVID-19 outbreak would allow Universal Credit to provide an effective safety net for families. This should be done by making advance payments as non-repayable grants, rather than as loans.

Tax Credits

While changes to Universal Credit are important, government needs to protect families still receiving tax credits as **two thirds of families are not on Universal Credit, but on Tax Credits.**

Whilst it is welcome that the Government have announced £1000 increase in Working Tax Credit, unlike the increase in the standard allowance for Universal Credit, this support will not reach non-working families. **The Government should introduce a parallel increase in the child element of Child Tax Credit.**

Furthermore, the Government urgently needs to suspend the Tax Credit income disregard for reductions in earnings at least for the financial year 2020-21, to ensure that where earnings fall, households' Tax Credit entitlement takes full account of this loss.

Since 2012, the first £2,500 of a household's earnings reductions in the current financial year (compared to the previous financial year) are ignored for Tax Credit purposes. This means that when a worker sees their earnings fall so that they earn £2,500 less than they did the previous financial year, the earnings figure used to calculate their Tax Credit entitlement is not adjusted down to take account of this. Instead, they are treated as if their earnings are the same as the previous year, which would typically cost them more than £1,000 over the course of a year in which they are likely to be financially struggling.

This is particularly problematic in the context of the COVID-19 pandemic, where considerable numbers of workers may be expected to see earnings reductions in excess of £2,500 over the

course of the year as a result of sickness or the need to provide care. **Although the additional £1000 in Working Tax Credit announced on 20 March is welcome and will in part make up the income loss for working families described above, it will not provide a further needed supplement.**

Hardship Fund

We welcome the £500 million package of support the Treasury has announced for local authorities to protect the most vulnerable during the COVID-19 outbreak. Guidance on this prioritises the provision of additional support with Council Tax for those on a low income. Whilst important, we believe that the support offered through this fund should extend beyond help with Council Tax, and in particular, help to meet the emergency financial support needs of households facing crisis.

Using existing infrastructure of Local Welfare Assistance Schemes would be an effective way to make payments to families facing financial crisis during this period. Local authorities without Local Welfare Assistance Schemes should be supported with the guidance they need to put in place structures to reach such families or partner with other Local Authorities to share best practice or operational capacity. Allocating a portion of the £500 million hardship fund would help ensure all local authorities are able to fully fund local welfare provision through this time.

A significant portion of the announced hardship fund should be allocated to Local Welfare Provision so that discretionary support can be allocated to all of the most vulnerable families who are experiencing financial emergencies as a result of the COVID-19 outbreak. Such support should be accessible to all who need it, regardless of immigration status.

Policy recommendations:

- *The Government should ensure Free School Meal vouchers are easily attainable, without a significant time lag, and valid for exchange in a range of accessible shops. These should be available to all school children, regardless of their family's immigration status.*
- *The Government should temporarily uplift Child Benefit Payments by £10 per child per week to help these families during this period of financial uncertainty.*
- *Advance payments of Universal Credit should be made as non-repayable grants, rather than as loans.*
- *The Government should introduce a £1000 increase in the child element of Child Tax Credit to parallel the uplift in Working Tax Credit.*
- *The Government urgently needs to suspend the Tax Credit income disregard for reductions in earnings at least for the financial year 2020-21*
- *A significant portion of the announced hardship fund should be allocated to Local Welfare Provision. Such support should be accessible to all who need it, regardless of immigration status.*

2. Refugee & Migrant Children and Young People

In 2019 The Children's Society provided support to 1,496 refugee and migrant children and young people. We work with separated children, as well as children in asylum-seeking families, children in families with no recourse to public funds and vulnerable children and families applying to the EU Settlement Scheme (EUSS). Many of the refugee and migrant children and families we support are at high risk of discrimination, destitution, social isolation and are dependent on specialist advice and advocacy services just to be able to access their rights and entitlements in the UK. The COVID-19 crisis is putting immense pressure on such services, meaning these risks are likely to increase for refugee and migrant children during this time.

We are particularly concerned for those with a precarious immigration status, as well as those who may have leave to remain but are subject to the no recourse to public funds condition (NRPF). We know that because of this exclusion, there is a high risk that many of these children will fall between the cracks, unable to access healthcare, likely to suffer an income shock, insecure housing or miss out on vital support like school meal vouchers during this crisis. Due to the long-term disruption that will be caused by COVID-19, we know that local authority resources and capacity will be taken up in dealing with the outbreak, civil society work will likely be disrupted and services such as outreach scaled back. Already vulnerable and isolated families will be pushed further to the brink. The below outlines our assessment of likely impacts of COVID-19 on specific groups and relevant policy recommendations:

Children in families with no recourse to public funds

Thousands of children's access to vital benefits and support through public funds is dictated by their parents' status. According to research published by the Mayor of London's office earlier this year, an estimated 215,000 undocumented children are living in the UK³ and they will have no recourse to public funds because of their parent's status. In addition, the majority of those who have lawful status will do so with 'no recourse to public funds' (NRPF) condition applied to their visa or their leave to remain in the UK which means that thousands more children and families will not be able to access vital welfare benefits and support even in an emergency. Many of these children will in fact be British themselves or will have been born here and know no other home.

Having NRPF means that affected children and families are prevented from accessing in-work and out-of-work benefits such as child benefit, tax credits, Universal Credit, income-related Employment and Support Allowance, income support, free school meals, local welfare assistance schemes, housing benefit and social housing. Unless their no recourse to public funds condition is automatically lifted, they will be excluded from the measures so far announced to support other families affected by the CV-19⁴.

The Children's Society has undertaken extensive work⁵ into the effect this has on children, from their development to the increased risks that they face. Our research has found that, between 2013 and 2015, more than 50,000 individuals including child dependents were granted leave to remain in the UK along with an NRPF condition, which means they have no access to mainstream welfare support. Many families with NRPF are living in abject poverty and inadequate accommodation. Many such families are forced to sofa-surf or live in

³ <https://data.london.gov.uk/blog/how-many-undocumented-children-live-in-london/>

⁴ <https://www.gov.uk/government/news/coronavirus-support-for-employees-benefit-claimants-and-businesses>

⁵ <https://www.childrenssociety.org.uk/what-we-do/resources-and-publications/making-life-impossible-how-the-needs-of-destitute-migrant>

overcrowded accommodation, which makes self-isolating extremely challenging and they are at an increased risk of either being evicted or falling ill.

Many parents are working on zero-hours contracts, insecure or low wage jobs and are therefore at an increased risk of losing their livelihood in the current pandemic, particularly with schools and nurseries closing indefinitely. We know from our frontline service and other research⁶ that many of these families are single parent households, primarily from Black, Asian and ethnic minority backgrounds, who will be unable to work following school closures because of childcare responsibilities. This will further increase financial strain on parents through a combination of reduced incomes and increased day-to-day costs as children remain at home. We know from our work that there appears to be a disproportionately high number of families whose children have special educational needs and require additional support from supporting agencies, who are all likely to be reducing services during this period.

While we understand the need for school closures in the interest of public health, it is important to highlight how schools often provide vital support to families with NRPF, enabling them to access food banks, receive advice and advocacy to access financial support and local authority care, as well as providing free school meals for some children and financial support including with clothing and basic provisions. The government's proposed roll out of Free School Meal vouchers is welcome, but given that Local Authorities have their own policies regarding Free School Meals (and some give them to all children regardless of their parents' immigration status), there is a risk that the voucher roll-out will miss out some of these most vulnerable children, who risk going hungry. Lack of access to school and in turn the services is like to leave many families with NRPF isolated from the limited support networks they can access and under greater financial strain.

Children in asylum-seeking families

Most families who claim asylum are destitute when they arrive in the UK, having had to leave their homes, possessions and money behind. They are generally not permitted to work⁷ until they are granted the right to remain in the UK, but they can access asylum support as set out in the Immigration and Asylum Act 1999 under Section 95, provided as accommodation and cash support intended to meet 'essential living needs' as determined by the Home Office. Some of the parents we support have significant physical and mental health issues – from disabilities due to torture to trauma from being sexually abused by traffickers. In some cases this will mean that children will be caring for their parents as well as themselves.

During the period of uncertainty and unprecedented strain on services, it is likely that asylum seeking children, young people and families will struggle to receive up to date information on ensuring they're complying with Home Office directions. We very much welcome the Home Office's decision to temporarily suspend reporting requirements and face to face substantive asylum interviews, however we know from our services that this has not yet been communicated directly to all children and families. The lack of coordination or appropriate information could mean these families and young people will face a period of uncertainty, resulting in them accidentally falling foul of changing rules or still presenting themselves to appointments, posing a risk to their own health and that of others.

Children and young people across our services have expressed their worries and anxiety around ensuring they are complying with regulations during this difficult time, particularly with advice and advocacy services closing and legal representatives unable to meet with them face to face or accompany them to appointments. In addition, this situation will inevitably result in

⁶ <https://www.unity-project.org.uk/research>

⁷ Main applicants can apply for permission to work after 12 months but only occupations on the shortage occupation list. This means that in practice, very few asylum seekers are permitted to work.

considerable delay in resolution of their asylum claims, meaning that vulnerable families will be seriously prejudiced by having asylum seeker status for a considerably longer period.

Separated children

As our research has highlighted⁸, unaccompanied and separated children experience high rates of mental health issues and often have complex needs – some are similar to those of other looked after children while others will be different. For example, they will have language or literacy barriers, some will have experienced torture; the loss they feel of being separated from their parents and loved ones, and not knowing if they are safe, is often unbearable. They equally require timely, comprehensive and specialist support yet often fall through the gaps in statutory support, facing subsequent risks of mental health crisis, suicide and going missing, which is also an indicator of exploitation.

As frontline services wind down with the outbreak of CV-19, separated children and young people are likely to be severely isolated, with limited contact with their social worker or personal adviser. We know from our frontline services that the normality and routine of attending colleges and youth groups play a significant role in maintaining stability and support for such vulnerable young people. Youth groups and advocacy services in different regions provide a lifeline to young people with no family in the UK – as children and young people will no longer be able to attend these services or drop-ins in person because of reduced services or as per government ‘social distancing’ advice, it is likely that many will feel isolated or unsupported and at increased risk of mental health crisis.

EEA Nationals

Following Brexit and the end of free movement, European Economic Area (EEA) nationals who wish to stay in the UK have to apply for status through the scheme by 31 June 2021.

The outbreak of CV-19 is likely to exacerbate the difficulties these most vulnerable children and young people already face in applying for EUSS. The EUSS Resolution Centre Local has temporarily closed, local authority resources and capacity will be taken up in dealing with the CV-19 outbreak, and civil society work will be disrupted and services such as outreach scaled back. Applicants are less likely to be able to access legal advice drop-ins or surgeries, reduced hours and capacity in embassies could make it harder to get nationality documents, while evidence of residence documents could be harder to source given added restrictions on council, GP and social worker times.

We have significant concerns that in the future, unless the EUSS deadline is postponed, vulnerable young EEA nationals, such as looked-after children are likely to be hit hardest by service disruption during COVID-19, to submit applications and are at risk of becoming undocumented in future. A later deadline would reduce the pressure on social workers supporting the thousands of EEA national children in care and care leavers who need to be supported to apply for settlement under the EUSS to regularise their status in the UK.

⁸ <https://www.childrenssociety.org.uk/what-we-do/resources-and-publications/distress-signals>

Policy recommendations:

- ***Suspend the No Recourse to Public Funds condition so that all children and families can access vital benefits and crisis support.*** This should involve lifting the NRPF condition for all children, young people and families so they can access vital benefits and ensuring that this is communicated to DWP/JCP/HMRC/local authority housing decision-makers deciding on benefits claims as well as those providing local welfare assistance schemes.
- ***Suspend immigration fees and Immigration Health Surcharge on the 10 year route to settlement for at least 12 months*** in recognition of the financial impact of CV-19, so families can prioritise any savings they have on ensuring they are able to buy basic provisions for their families during the CV-19 outbreak, instead of spending it on Home Office application fees.
- ***Reconsider the decision to increase the Immigration Health Surcharge in October*** to minimise the risk of yet more people ending up unable to pay the surcharge and remaining undocumented.
- ***Suspend the assessment process for asylum support*** to ensure that everyone who needs support is able to access it.
- ***Allow a grace period of at least six months with Home Office application deadlines*** as children and families may not be able to access legal advice, have access to online facilities/Wi-Fi, travel to solicitors, gather evidence from supporting agencies during the outbreak and may not be able to submit in time applications. It is imperative that vulnerable migrants are not penalised for this by becoming over stayers due to matters beyond their control which make it extremely difficult to comply with Home Office processes.

3. Young People at Risk

We are concerned that the situation for many of the most vulnerable children living in society could get worse over the next few months and potentially over the next few years as a result of COVID-19. We strongly believe that we must continue to provide support to all of the most vulnerable children in our society and need to consider how best to support children in care, children at risk of being exploited, including those who are going missing from home or care, children at risk of abuse or neglect at home, children who may be at risk of homelessness and for young carers.

We welcome that the government made the decision to provide education in schools for children of key workers and those who are considered vulnerable. In difficult times schools can provide an important safeguard for children who may be at risk of abuse or exploitation. It is important though that children who do not meet the threshold for social care intervention and therefore not entitled to school support, or children who are no longer in schools, still remain on the radar of services and have trusted professionals to turn to in an hour of need. It is also important that work continues to provide support outside school and identify children who may become vulnerable during this difficult time.

It is not yet known how long the emergency situation brought about by the spread of COVID-19 may last. During this challenging time many vulnerable children will be becoming adults and may miss out on provision of support that will help them thrive in the future. It is important that provision of support with transitions to adulthood continues, or where it is delayed, provided after the Covid 19 emergency.

This briefing considers potential impact of COVID-19 on some of the vulnerable groups of children and young people. Some of the issues that apply to all vulnerable children are:

- **Safeguarding.** Children should be safeguarded and plans need to be put in place for each vulnerable child to have an identified trusted professional who can check on their safety and wellbeing
- **Communication.** Availability of support may be affected but care should be taken that children always receive age appropriate communication about changes and helped to deal with situation they face
- **Reducing delay.** While some delays with provision of support may happen as a result of COVID-19 it is important that monitoring is in place to provide service once it is possible and as soon as possible
- **Advocacy.** Children's wishes and feelings should continue underpin support and care they receive

Looked after children

On March 31 2019 there were 78,150 looked after children in England.⁹ While the majority of looked after children live with foster families, some of the most vulnerable live in children's homes.

Contingency plans need to be put in place to ensure that adequate support is provided if through the impact of COVID-19 there are shortages of staff in children's homes, among foster carers and social workers.

⁹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/850306/Children_looked_after_in_England_2019_Text.pdf

There is also a need for a national guidance for social workers and care staff on how to keep looked after children safe, in situations where a child or a worker requires to isolate as a result of becoming ill with COVID-19.

It is important that in the same way as parents communicate to their children at home about COVID-19 and restrictions it imposes on day to day lives to ease children's fears and help with their wellbeing, there is information and support for looked after children helping them navigate through these difficult times.

In addition, restrictions due to COVID-19 may result in disruption of children's contact with families and friends. Care must be taken that these restrictions are explained and that they do not happen unnecessarily. Children should continue to have access to advocacy services to help them raise concerns if they are not happy with the level of care they receive.

Unregulated accommodation

The exact number of looked after children placed in unregulated accommodation is not reported on. However, according to a parliamentary answer to Tim Loughton, MP, between 2014 and 2018 there has been a 53 percent increase in the number of looked after children living independently in supported or semi-supported accommodation (up from 3,280 in 2014 to 5,020 in 2018) and 97 percent increase in the number of children living in supported or semi-supported accommodation outside their home local authority area (up from 1,020 in 2014 to 2,010 in 2018).¹⁰

We are worried that many of these settings are not fit for purpose. Often they are not staffed through the night, there are shared bathrooms and cooking spaces and some young people don't have access to basic things such as WiFi, health care and means to wash their clothes. All too often we hear from young people that they don't feel safe in these settings, they report not knowing who to turn to with problems and some young people report sharing accommodation with adults experiencing problems with their mental health or with substances.¹¹

We are concerned that children living in these settings run the risk of not being adequately informed about the risks of infection and how and when to self-isolate or even have the means to do so. **These young people must be provided with up to date health and safety information, they must be kept safe from other individuals who pose a health risk to them and they must be cared for in instances of them becoming sick themselves.**

Out of area care placements

There were 32,110 looked after children living in out of area care placements on March 31 2019.¹² In 2019, the All Party Parliamentary Group (APPG) for runaway and missing children, supported by the Children's Society, highlighted that many children and young people placed out of area feel lonely and isolated and cut off from their friends and family back home.¹³

Young people reported not being supported to keep in touch with friends and family at home. The inquiry heard that for many of these young people this lead to them making dangerous journeys to get back to the place they call home. We are concerned that as young people, or their social workers and IROs from the home local authority, are expected to self-isolate as a

¹⁰ Written Question to Department for Education, 2019. Available at: <https://www.parliament.uk/business/publications/written-questions-answers-statements/writtenquestion/Commons/2019-03-28/238421/>

¹¹ <https://www.childrenssociety.org.uk/sites/default/files/no-place-at-home.pdf>

¹² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/850306/Children_looked_after_in_England_2019_Text.pdf

¹³ <https://www.childrenssociety.org.uk/sites/default/files/no-place-at-home.pdf>

result of COVID-19 those who are in out of area care placements, their feelings of isolation could increase.

It is important that plans are made for how information about the impact of COVID-19 care arrangements is communicated to children and that they are kept informed about any changes in staff availability and provided with contact details of relevant professionals.

Children experiencing abuse and neglect

In 2019, 54% of children in need at 31 March had abuse or neglect recorded as their primary need identified at assessment – this equates to 215,730 children and young people identified as being at risk of abuse and neglect in the home.¹⁴

For many children and young people, school acts as a protective factor and at the most basic level as childcare and a safe place to be during the day. We are concerned that if/when schools are forced to close that for children and young people who are experiencing abuse and neglect in the home these risks could be magnified.

We welcome the government's plan to keep school open for children who are subject to child in need and children on child protection plans. We believe that there needs to be co-ordinated approach between local authorities' children's social care teams and schools to ensure that vulnerable children are supported to continue to attend schools.

We are concerned that as result of staff shortages some children may slip under the radar of services due to delays with assessments of needs or provision of support. **We would like to see plans in place to ensure that when required, assessments of needs will be coordinated and support will be provided. We would also like to see each child having an identified trusted professional who they can go to if they need help.**

Social services must continue to make regular checks on children and their families during a time of increased stress and anxiety and time spent at home. It is important that the rights of the child are not forgotten and we must continue to listen to their voices when it comes to identifying and offering the support that they need.

Young carers

According to data from the last census there are 166,363 young carers in England.¹⁵ The Children's Society believes that this could just be the tip of the iceberg as many young carers remain hidden from official sight for a range of reasons. In 2010, a BBC and University of Nottingham survey suggested there could be four times the number of young carers than the census suggested.¹⁶ We are concerned that as parents and carers become ill with COVID-19 more and more children and young people will be find themselves taking on caring responsibilities.

Many young carers come from marginalised groups and are often caring for a parent or carer who suffers from poor mental health or a substance dependency. Often young carers remain under the radar and out of sight of authorities there to support them.

¹⁴ <https://www.gov.uk/government/statistics/characteristics-of-children-in-need-2018-to-2019>

¹⁵ <https://www.childrenssociety.org.uk/what-we-do/resources-and-publications/publications-library/hidden-view>

¹⁶ <https://www.bbc.co.uk/news/education-11757907>

COVID-19 is posing significant challenges to existing young carers. It will also draw many more young people into caring roles if the virus affects their family. It is vital that during this time the Government works to support young carers.

Schools are crucial to young carers. Teachers and support staff are often the most trusted and important professional relationship in a young carer's life. Young carers are more likely to be identified through their school compared to health services. The closure of schools will not only put young carer's learning at risk, but it will also significantly reduce their support network. As long as schools follow strict hygiene and social distancing procedures, there is no reason why young carers should not be able to continue to go to school during this period. Attendance will give them a break from caring, support their education, and also ensure that, should the situation at home deteriorate, they have access to supportive and known professionals who can ensure they are not put at risk and that their family's health care needs are met.

The Department for Education should instruct schools to designate all young carers as vulnerable and therefore allow them to attend school during this period.

Schools should use the outbreak of COVID-19 to reassess their approach to young carers. Many hidden young carers may be identified during this period as their family's healthcare needs become more pronounced. Schools should think carefully about who might be caring for family members during this time and how they might provide ongoing support.

The emergency legislation passed to help the Government respond to the virus releases local authorities from their statutory duties to young carers including young carer assessments and transitional assessments for young carers moving into adulthood. Whilst we understand that services will be stretched at this time we are very concerned about the suspension of these duties and would like safeguards to be put in place to ensure that young carers do receive support during this time and that any backlog of assessments is quickly rectified as soon as possible in the coming months.

During this period, local authorities should actively check-in on known young carers to ensure that they have the support they need. This will likely be a very stressful and anxious time for them and these check-in phone calls could be used to identify any emerging needs or concerns.

Young carers are often required to do their family's food shopping and during this time they may need to go to the chemist to pick up prescriptions for more vulnerable family members. Communities should look to support young carers in whatever way they can.

Many supermarkets are putting aside dedicated shopping times for older people and key workers. We would encourage them to allow young carers to shop during this time in order to make it simpler and safer for them to make sure their family has all the food they need. The Government should provide advice to pharmacies to ensure that young carers can access all the medicines they need for their family during this time.

Children who go missing from home or care

Children and young people going missing from home or care is a sign that things are not well in their lives. They may be running away from neglect at home or running towards individuals trying to exploit them. In 2015/16 police forces in England and Wales recorded 148,050

incidents of children and young people going missing from home or care.¹⁷ However, this is likely an underestimate as we know that many incidents go unreported.

In particular we know from our research that the principal trigger for running away is problems with family relationships.¹⁸ These may be exacerbated by the current restrictions on movement which mean that families are obliged to spend more time together, at a time when the additional stresses within households (e.g. due to the financial implications for parents who are unable to work) are increasing.

For many children and young people going missing can feel like their only option – and there are likely to be many more who feel this way as the effects of isolation are felt. It is vital that they receive an adequate response from all statutory agencies.

The police must still work to keep child and young people safe, they must continue to proactively look for children who go missing when necessary and they must continue to disrupt criminal networks and risks of exploitation.

Children who go missing are statutorily entitled to an offer return home interview (RHI) when they go missing and return.¹⁹ The interview should be an information conversation between the young person and an independent trusted adult and should identify any harm that the child came to, risks that they may still be facing and should identify and follow-up support needed to help keep the young person safe.

Whilst we understand that we are working in uncharted territory and children's social care teams and RHI practitioners will be facing sickness and periods of self-isolation we consider it vital that children and young people who go missing are still offered support when they return. **RHI providers must explore ways of delivering RHIs over the phone if necessary and look into ways of providing follow up support in new ways.**

Children at risk of sexual and criminal exploitation

COVID-19 is likely to lead to less oversight of vulnerable young people – particularly for those who are not formally recognised by the social care system – because day-to-day contacts with professionals (teachers for example) will be less frequent. This may afford greater opportunities for targeting and grooming by individuals outside their families for sexual or criminal purposes.

Young people are also likely to be spending a great deal more of their time online – and may be particularly drawn to social media in a bid to preserve or build connections with others. This could increase exposure to grooming and it will be particularly important that parents or carers talk to their children about keeping safe online.

At the same time, if young people are outside in their neighbourhoods, or away from their local community – and potentially at risk – they will also be more visible because of current measures which ask everyone to stay at home. This may be an opportunity for the police, or other professionals (e.g. including those who staff public transport), to identify those who are spending time away from home, travelling to see friends or abusive adults, who may stand out because of their presence in less busy streets or otherwise sparsely-used buses and trains.

¹⁷ National Crime Agency (2017) Missing Persons Data Report 2015/16 2.0

<http://www.missingpersons.police.uk/en/resources/missingpersons-data-report-2015-16>

¹⁸ Our research on young runaways spans two decades – the most recently-published study was in 2011

https://www.childrenssociety.org.uk/sites/default/files/tcs/still_running_3_full_report_final.pdf

¹⁹ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/307867/Statutory_Guidance_-_Missing_from_care__3_.pdf

It will be important that professionals are sensitive to the risks and threats that exist in the community and take appropriate steps should they be concerned about young people who are not at home when they should be.

This highlights the importance of preserving effective systems for referral and assessment of children's needs, but also that police and any other professionals or members of the public should be encouraged to be aware of the vulnerability of some young people and to alert the authorities where they have concerns about a child.

Where these children are known to services we would like to see a trusted professional identified who is tasked with making regular contacts and checking on the wellbeing of a child. In cases of criminal exploitation it is important that NRM referrals are always considered when exploitation is identified and that in court cases judges are instructed to consider statutory defence under the Modern Slavery Act.

Policy recommendations:

- *The government must ensure an adequate proportion of the £5billion funding announced in the Budget for supporting public services in their response to COVID-19 reaches children's social care.*
- *Information resources must be developed for social workers, carers and parents to help young people understand the situation with COVID-19, how to stay safe and safe, isolate, and how to communicate any changes in support they receive.*
- *All looked after children, and especially those living in out of area placements, should be supported to keep in touch with friends and family via phone and other digital methods of communication.*
- *Social services, or designated trusted professionals, must continue to make regular checks on children and their families identified as being in need due to abuse and neglect.*
- *Schools should use the outbreak of COVID-19 to reassess their approach to young carers. The Department for Education should provide guidance on this, including instructing schools to designate all young carers as vulnerable and therefore allow them to attend school during this period.*
- *The crisis will likely highlight the extent of children and young people supporting their own families – parents, grandparents and siblings with health care and support needs – and this may be an opportunity to build an improved understanding and response. During this period, local authorities should actively check-in on known young carers to ensure that they have the support they need and all agencies should coordinate intelligence around families who are struggling, including in cases where parents or carers become ill as a result of the outbreak.*
- *Many supermarkets are putting aside dedicated shopping times for older people and key workers. We would encourage them to allow young carers to shop during this time in order to make it simpler and safer for them to make sure their family has all the food they need. The Government should also provide advice to pharmacies to ensure that young carers can access all the medicines they need for their family during this time.*

Continued policy recommendations:

- *The police must continue to record instances of missing children, proactively search for them and record and share information and intelligence about their missing episodes.*
- *Local authorities must ensure, where feasible, that RHIs for children who go missing from home and care continue to happen albeit in different ways.*
- *Police, workers on public transport and other professionals – as well as the general public – should be made aware of the potential risks to young people who are out and about when they should be at home – and encouraged to take an appropriate approach to safeguarding them.*

4. Mental Health and Wellbeing

Children's well-being has been in decline in this country since 2009. The rapid spread of the COVID-19 virus is resulting in massive and widespread changes to daily life and will have consequences for children's well-being. For young people with mental ill-health the effects of the virus may be particularly challenging. There are currently one in eight children aged 5-19 in England who have a diagnosable mental health condition.²⁰ COVID-19 may result in heightened feelings of anxiety and worry and could exacerbate low-mood and other mental health conditions. This short briefing will outline the impact that we believe COVID-19 will have on children's mental health and well-being.

Children's wellbeing

Children's well-being will be significantly affected by the COVID-19 outbreak. We know that stories that regularly make the news, and are the subject of national debate, are important to young people and they can find them particularly worrying.

Last year's Good Childhood Survey²¹ for example, asked children and young people how worried they were about a range of issues facing society. Whilst only 24% of young people reported being 'quite' or 'very' worried about Brexit, some 41% were 'quite' or 'very' worried about the environment and climate change.²² We would expect levels of worry about COVID-19 to be higher. With schools now closed for most, young people are directly experiencing social distancing, high levels of isolation, and the wider social and economic dislocation COVID-19 will cause. Already there have been reports of COVID-19 related anxiety for example.

Children's well-being will not just be impacted as a result of anxiety and worry about the virus however. As their lives change there will be significant challenges to overcome. One way of considering the implications is to use the Good Childhood Index, The Children's Society's multi-item measure of satisfaction with ten domains we know have significant explanatory power of children's overall well-being.

²⁰ <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2017/2017>

²¹ <https://www.childrenssociety.org.uk/what-we-do/resources-and-publications/the-good-childhood-report-2019>

²² <https://www.childrenssociety.org.uk/what-we-do/resources-and-publications/the-good-childhood-report-2019>

Domain	Potential Impact
Home	As a result of COVID-19, children will likely be spending a lot more time at home. We might expect them to become less satisfied with their home – particularly if they do not feel they have enough space. Whilst the consequences of greater time at home may reduce satisfaction with home for all children, for the 5.7% of children who generally report being unhappy with their home this may be a particularly difficult time.
Family	As a result of COVID-19, children will likely be spending a lot more time with some family members, and a lot less time with others. Satisfaction with family is high among children in the UK – which is important as relationships with family are the most important building block in overall well-being. However families are complicated – split living arrangements, child care provided by grandparents, multi-generational homes, and the impact contracting COVID-19 might have on certain family members like grandparents or others with particular vulnerability, could have significant impact on children's well-being.
Friends	As a result of COVID-19, children will likely be spending a lot less time with friends. Time spent with friends, particularly without adult supervision, is important to children's well-being. In the coming months children will likely have to maintain their friendships online. For many this may prove difficult – particularly those without reliable internet access. Furthermore, many young people have negative experiences online – for example cyberbullying.
Health	The consequences for children's satisfaction with their own health is likely to be wide ranging. Those with long-term physical health conditions may feel less confident about managing them effectively. COVID-19 will likely affect children's mental health. Concern and worry about the virus will likely impact those living with anxiety and depression. For those with hyperactivity conditions or ADHD being restricted in movement at home may be quite challenging. And children with special educational needs or learning disabilities may need additional support to adapt to changes in routine and to understand what is going on.
School	Initially, not having to go to school might actually be quite exciting. For the 12% of young people who are unhappy in their schools it might actually be something of a relief. But without opportunities to socialise and learn young people will likely struggle and their well-being suffer.
Money and Things	The financial implications of COVID-19 are already becoming apparent. We know children growing up in households with problem debt are five times more likely than other children to have low well-being and so for families that lose employment or income, and have to rely on credit the consequences could be significant. We also know that any experience of poverty or financial strain during childhood is linked to lower well-being and poorer mental health at age 14. ²³ The economic dislocation caused by COVID-19 will have long term impacts for our children.
Choice	Practising social distancing, or even being self-isolated, will reduce the choice and autonomy children and young people have over their lives. It will be crucial during this period to carefully listen to, and include children, in family decision making so they can feel some ownership over the decisions made and not constantly feel like they are being told what to do.
Future	COVID-19 looks like it will have long-term consequences for society. As children think about the future they will consider how the consequences affect them and their families. Alongside worries about long term health

²³ <https://www.childrenssociety.org.uk/what-we-do/resources-and-publications/the-good-childhood-report-2019>

	there may also be important positive consequences as young people respond by deciding to pursue careers in healthcare, the sciences, or public service.
Appearance	The consequences of COVID-19 on how children feel about their appearance are perhaps the most challenging to predict. Perhaps time spent away from other young people will lessen the pressures young people feel to look a certain way and fit in. On the other hand, increased time online might reinforce certain conceptions of beauty and therefore have a negative impact. It seems plausible that young people may develop particularly high standards of personal-hygiene in response to the pandemic. More thorough hand-washing may spill over into other areas of personal hygiene like teeth-brushing, face-washing, showering etc. In the extreme cases, this could border on Obsessive Compulsive behaviours.
Time use	Practising social distancing, or even being self-isolated, will reduce the choice and autonomy children and young people have over their lives. They may find themselves unable to take part in important recreational activities that improve their well-being like sports, arts, music or games. Children may also struggle because of increased amounts of free time, but with few activities to fill it.

As decision makers develop guidance and families adapt to the COVID-19 response, the best way to maintain and improve children's levels of well-being is through the 'five ways to well-being'.²⁴ These five types of activity improve well-being and have been identified using a wide ranging international evidence base. For children and young people, the five ways to well-being are:



By aiming to maintain friendships, provide opportunities for physical and creative recreation and support children to continue learning, there is much society at large can do to ensure that the COVID-19 pandemic does not have wide ranging and significant implications for well-being.

²⁴ <https://www.childrengsociety.org.uk/what-we-do/research/well-being/ways-well-being>

Loneliness

The government guidance advocating social distancing and social isolation for those that are unwell, may lead to increased feelings of loneliness among children and young people. We know from our previous research that loneliness is already an issue for this group and that it can negatively impact on their well-being. Our research found that children who felt lonely 'some of the time' or 'often' had lower mean well-being compared to those who felt lonely 'hardly ever or never'.²⁵ This research also found that children in poverty reported being lonely more 'often'.²⁶

As measures such as social distancing become the new reality and with the risk of schools closing, young people face becoming disconnected from friendships and social interaction. This could have profound impacts on young people feeling lonely and subsequently their overall well-being.

Mental health support services

Whilst the risk of mental ill health will be heightened during the coming months, there could be a drop off in NHS mental health support that is available to children and young people. The additional pressure placed on the NHS by the virus will mean that NHS services will become even more stretched. This will be exacerbated by limited staff capacity as more staff become unwell and go into self-isolation.

Consequently, for young people who are already receiving support from NHS Children and Young People's Mental Health Services (CYPMHS), this could lead to their appointments either being conducted by telephone/online, postponed or cancelled altogether. Young people also may not be able to attend appointments if they are feeling unwell or are feeling anxious to attend due to social distancing measures. In addition, young people who receive a referral to NHS CYPMHS during this period may experience even longer waits for support. Currently, the average waiting time for a young person to enter treatment is 53 days²⁷ but the outbreak of COVID-19 risks this being even longer. Previous research from *YoungMinds* found that the longer children were left to wait for mental health support the more likely it was their mental health worsened.²⁸

However, with careful planning CCGs and NHS Trusts should be able to work with voluntary and community sector partners to ensure that there is still basic support in place and that young people with the most urgent needs get quality care and support.

Already some changes to the health system in response to COVID-19 are becoming apparent. To increase capacity, the government has proposed measures to increase the availability of health staff in the workforce through enabling retired healthcare professionals to become part of the health and social care workforce. It is likely that these professionals will be used to respond to the immediate increase COVID-19 cases, rather than plug the gap in other parts of the system. Mental health legislation could also become more relaxed to enable greater flexibility for services to respond.

²⁵ <https://www.childrenssociety.org.uk/what-we-do/resources-and-publications/loneliness-in-childhood-exploring-loneliness-and-well-being>

²⁶ Ibid.

²⁷ <https://www.childrenscommissioner.gov.uk/publication/the-state-of-childrens-mental-health-services/>

²⁸ <https://youngminds.org.uk/about-us/media-centre/press-releases/three-quarters-of-young-people-seeking-mental-health-support-become-more-unwell-during-wait-for-treatment/>

To fill the gap in NHS support that will inevitably be caused by COVID-19, more informal sources such as helplines and online support will become increasingly important. There are various helplines and online communities of support that could provide much needed support to young people during this uncertain time. An online approach also contributes to building a community of support around the young people so they know they are not alone in what they are feeling. It is crucial that support of this kind of is promoted to young people. Delivering support online has significant consequences for practitioners. Many are not trained to deliver online support and may not have the skills to deal with high levels of disinhibition or the confidence to safeguard effectively online. **The Department of Health and Social Care should look to provide free basic training on online therapeutic counselling and mental health support in order to support the thousands of self-employed, casual, and volunteer counsellors and therapists in this country who do not work for the NHS but provide crucial community support for children and young people.**

Examples of alternative methods of support

- [The Mix online community](#) – The Mix is a UK based charity that provides free, confidential support for young people under 25 and offers a number of online support services. This includes forum/discussion boards and a group chat which runs 5 nights a week. They also offer a helpline which can be accessed via the telephone or web chat and online or telephone counselling.
- [Kooth](#) – provides free online support to young people.
- [ChildLine](#) – Provides access to a counsellor for young people through an online chat or helpline. Information and advice can also be accessed on the website.

Support services also need to consider alternative ways to provide mental health support to children and young people. For example, utilising the Kooth online counselling platform to young people who are unable to attend appointments or are on the waiting list. Services could also consider making the contact over the phone to check in with young people – this could be especially relevant for drop in services. **In reconfiguring community services, the NHS should consider switching, where possible, to provide therapeutic support via telephone, allowing young people and professionals to attend from home.** Areas could also consider telephone triage to help signpost young people to advice and support and give them a listening-ear to reassure them during this challenging time. In inpatient units, young people will likely be extremely isolated and regular video calls to friends and family must be supported.

Policy Recommendations:

- *As decision makers develop guidance and families adapt to the COVID-19 response, the best way to maintain and improve children's levels of well-being is through the 'five ways to well-being'. These five types of activity improve well-being and have been identified using a wide ranging international evidence base.*
- *To fill the gap in NHS support that will inevitably be caused by COVID-19, more informal sources such as helplines and online support will become increasingly important*
- *Support services also need to consider alternative ways to provide mental health support to children and young people.*
- *In reconfiguring community services, the NHS should consider switching, where possible, to provide online or telephonic therapeutic support, allowing young people and professionals to attend from home.*
- *The Department of Health and Social Care should look to provide free basic training on online therapeutic counselling and mental health support in order to support the thousands of self-employed, casual, and volunteer counsellors and therapists in this country who do not work for the NHS but provide crucial community support for children and young people.*

The Children's Society have created a resources hub on our website for children and families which can be found [here](#). **Please note:** this is an evolving report - it will be updated as and when new government measures are introduced as well as when more information, evidence and emerging risk is gathered and analysed from our own services across England.